



Substitute for form 1449/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet

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of

6

Complete if known

Application Number	10/823,803
Confirmation Number	5190
Filing Date	April 12, 2004
First Named Inventor	Connie T. Marshall
Art Unit	3713
Examiner Name	Scott E. Jones
Attorney Docket Number	ODS-7 Div.

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Document Number Number - Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Documents	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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				Attorney Docket Number	ODS-7 Div.
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Examiner initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	1*
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Examiner Signature	<i>Mac</i>	Date Considered	<i>✓</i>
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